PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)				
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 09/972,142			220772007420				
			Filed C	October 5, 2001			
	SEPARATOR PLATE REACTO			<u> </u>			
Art Unit 1725			Examiner	K. Kerns			
dentified application.			_				
he requested extens	sion and fee are as follows (che		•				
One mor	nth (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	<u>\$</u>			
=	nths (37 CFR 1.17(a)(2))	\$450	\$225	\$			
	onths (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00			
	nths (37 CFR 1.17(a)(4))	\$1590	\$795	\$			
	nths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$			
Payment by c	e amount of the fee is enclosed redit card. Form PTO-2038 is	attached.	application to a Dep	osit Account.			
The Director is Deposit Accord	s hereby authorized to charge	I have enclose	ed a duplicate copy or m (PTO/SB/17) is a	of this sheet. Fee			
X The Director is	s hereby authorized to charge	I have enclose Transmittal for	ed a duplicate copy or m (PTO/SB/17) is a	of this sheet. Fee			
The Director is Deposit Accord	s hereby authorized to charge a unt Number <u>03-1952</u>	I have enclose Transmittal for submission in tire interest. See 37	ed a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71.	of this sheet. Fee ttached to this			
The Director is Deposit Accord	s hereby authorized to charge aunt Number 03-1952  applicant/inventor.  assignee of record of the ent	I have enclosed Transmittal for submission in tire interest. See 37 3.73(b) is enclosed	ed a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71. I. (Form PTO/SB/96	of this sheet. Fee ttached to this			
The Director is Deposit Account if am the	s hereby authorized to charge aunt Number 03-1952  applicant/inventor.  assignee of record of the ent Statement under 37 CFR	I have enclosed Transmittal for submission in submission in the interest. See 37 to 3.73(b) is enclosed Registration Number 1.34.	ed a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71. I. (Form PTO/SB/96	of this sheet. Fee ttached to this			
The Director is Deposit Account if am the	applicant/inventor.  assignee of record of the ent Statement under 37 CFR attorney or agent of record.	I have enclosed Transmittal for submission in submission in the interest. See 37 to 3.73(b) is enclosed Registration Number 1.34.	cd a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71.  I. (Form PTO/SB/96 or 40,030	of this sheet. Fee ttached to this			
The Director is Deposit Account of the Deposi	applicant/inventor.  assignee of record of the ent Statement under 37 CFR attorney or agent under 37 C Registration number if acting to Signature	I have enclosed Transmittal for submission in submission in the interest. See 37 to 3.73(b) is enclosed Registration Number 1.34.	cd a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71.  I. (Form PTO/SB/96 or 40,030	of this sheet. Fee ttached to this			
The Director is Deposit Account of the T	applicant/inventor.  assignee of record of the ent Statement under 37 CFR attorney or agent of record.	I have enclosed Transmittal for submission in submission in the interest. See 37 to 3.73(b) is enclosed Registration Number 1.34.	ed a duplicate copy of m (PTO/SB/17) is a duplicate.  CFR 3.71.  I. (Form PTO/SB/96 or 40,030 or 40,030 or 40,030 or 650	of this sheet. Fee ttached to this			

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PTO/SB/17 (12-04v2)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL** 

Co	mplete if Known
Application Number	09/972,142
Filing Date	October 5, 2001
First Named Inventor	Daniel G. LOFFLER
Examiner Name	K. Kerns
Art Unit	1725
Attorney Docket No.	220772007420

For FY 2005			First Name		Daniel G. LOFFLER				
			Examiner N	lame	K. Kerns				
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit		1725				
TOTAL AMOUNT OF PAYMENT (\$) 510.00			Attorney Docket No. 220772007420						
METHOD OF PAYMEN	T (check all	that apply)			*				
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s)	indicated be	olow			harge fee(s) i	ndicated below,	except for th	e filing fee	
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION								,	
1. BASIC FILING, SEARCH	-								
	FILIN	IG FEES	SEA	ARCH FEE		INATION FEE	-		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small E		Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	300	150	500	250	200	100	0.	00	
Design	200	100	100	50	130	65	0.	0.00	
Plant	200	100	300	150	160	80	0.	0.00	
Reissue	300	150	500	250	600	300	0.	0.00	
Provisional	200	100	0	0	0	0	0.	00	
2. EXCESS CLAIM FEES Small Entity									
Fee Description Fee (\$)									
Each claim over 20 (including Reissues) 50 25									
E -	Each independent claim over 3 (including Reissues) 200 100								
Multiple dependent claims 360 180									
		Fee (\$)		Paid (\$)	•	Multiple Depen			
49 -49 =	49 -49 = 0 x 25.00 = 0		.00	•	Fee (\$) Fee Paid (\$) 180.00 0.00		1 .		
Index Claims Even	Claima	Fac (\$)	Eoo I	oid (t)		160.00	0.00	_	
		<u>Fee (\$)</u> 100.00 =		Paid (\$) .00	•		•		
3. APPLICATION SIZE FE				.00	•				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction there									
. —	xtra Sheets	-			or fraction the			Paid (\$)	
- 100 = /50 (round up to a whole number) x 125.00 = 0.00									
· · · · · · · · · · · · · · · · · · ·						Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 2253 Extension for response within third month					0.00 510.00				
SUBMITTED BY				Registration	No. 40.00	O T-1	(650) 04	2 5076	
Signature fu a.	pacoloon			(Attorney/Age		0 Telephone	(650) 81	3-30/0	

SUBMITTED BY						
Signature his a. hardson	Registration No. (Attorney/Agent)	40,030	Telephone	(650) 813-5876		
Name (Print/Type) Jill A. Jacobson			Date	May 16, 2005		